

RECEIVED  
CENTRAL FAX CENTER

1001

## TELECOPIER COVER SHEET

November 1, 2004

NOV 01 2004

<b>To:</b> Assistant Commissioner for Patents	<b>From:</b> Estella Pineiro Patent Administrator 818/493-2251
<b>Attention:</b> <b>Examiner R. Bradford, Art Unit 3762</b> <b>TECHNOLOGY CENTER 3700</b>	<b>ST. JUDE MEDICAL CRMD</b> 15900 Valley View Court Sylmar, California 91392-9221
<b>Telecopier:</b> 703/872-9306	<b>Telecopier:</b> 818/362-4795
<b>RE:</b> Amendment and Request for Reconsideration (AF)	Number of pages being sent: <u>6</u> (including cover page)

**Serial No.** 10/077,660  
**Filed:** 02/14/2002  
**Our Docket No.** A02P1016US01

**PLEASE DELIVER TO EXAMINER R. BRADFORD, Art Unit 3762. Thank you.**

---

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE AND THOSE PROPERLY ENTITLED TO ACCESS TO THE INFORMATION AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, AND/OR EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS TRANSMISSION IS NOT THE INTENDED OR AN AUTHORIZED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY UNAUTHORIZED DISTRIBUTION, DISSEMINATION, OR DUPLICATION OF THIS TRANSMISSION IS PROHIBITED. IF YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR, PLEASE IMMEDIATELY

DISPOSE OF IT BY TRASHING OR DESTROYING. THANK YOU!

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicant(s):** Euljoon Park et al.  
**Serial No.:** 10/077,660      **Examiner:** R. Bradford  
**Filed:** 02/14/2002      **Art Unit:** 3762  
**Docket No.:** A02P1016US01  
**For:** CARDIAC STIMULATION DEVICE INCLUDING  
SLEEP APNEA PREVENTION AND TREATMENT

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment AF  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- Amendment and Request for Reconsideration  
 Transmittal Letter, Fee and Cert. of Mailing

CALCULATION OF FEES						
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE	\$ FEE
A	TOTAL CLAIMS FEE	4	21	0	X \$18	\$ 0
B	INDEPENDENT CLAIMS FEE**	1	3	0	X \$88	0
C	MULTIPLE- DEPENDENT			0	X \$300	
D	EXTENSION OF TIME FEE — 1-mon: \$110; 2-mon: \$430; 3-mon: \$980; 4-mon: \$1,530; 5-mon: \$2080					0
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee; Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:					0
F	<b>TOTAL ADDITIONAL FEE**</b> (ADD TOTALS FOR LINES A,B,C,D, and E)					\$ 0**

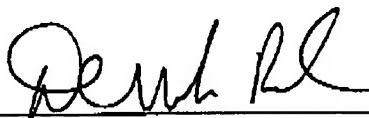
Charge Deposit Account No. **16-0068**      \$ 0 \*\*      A copy of this letter is  
the amount of

- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068
- Any additional filing fees required under 37 CFR 1.16.
- Any patent application processing fees under 37 CFR 1.17.
- The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
- Any patent application processing fees under 37 CFR 1.17.
- Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date:

11/1/04

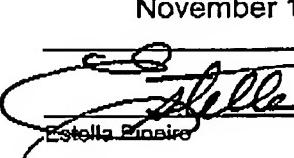


Derrick Reed, Attorney for Applicants  
Reg. No. 40,138

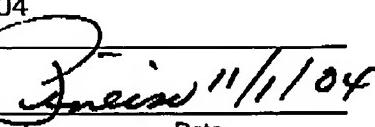
**CUSTOMER NUMBER: 36802**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

November 1, 2004



Estella Pinaire



Date